

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007827

Entity Name: HURRICANE JUMPERS COMPETITION TEAM INC.

Current Principal Place of Business:

1131 NE 97TH STREET
MIAMI SHORES, FL 33138

Current Mailing Address:

P.O. BOX 530478
MIAMI SHORES, FL 33153 US

FEI Number: 80-0636081

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOODY, YVONNE
1131 NE 97TH STREET
MIAMI SHORES, FL 33138 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT
Name SPINNENWEBER-SALOW,
 CATHERINE
Address 10634 NE 10 COURT
City-State-Zip: MIAMI SHORES FL 33138

Title VP
Name BELLINSON, JENNIFER
Address 9205 NE 4TH AVE.
City-State-Zip: MIAMI SHORES FL 33138

Title CO-SECRETARY
Name MARRIOTT, TIFFANY
Address 530 NE 52ND TERR.
City-State-Zip: MIAMI FL 33137

Title ASST. TREASURER, FUNDRAISING
Name GODFREY, KAREN
Address 1481 NE 102ND ST.
City-State-Zip: MIAMI SHORES FL 33138

Title SECRETARY, TREASURER
Name KOCH, JANIS
Address 25 NW 89TH STREET
City-State-Zip: EL PORTAL FL 33150

Title COMMUNICATIONS SECRETARY
Name DOMOND, DANA
Address 11673 NE 18TH DR.
City-State-Zip: MIAMI FL 33181

Title CO-SECRETARY
Name WAKIM, NUHA
Address 10642 NE 11TH AVE.
City-State-Zip: MIAMI SHORES FL 33138

Title ASST. TREASURER, FUNDRAISING
Name GRAVES, MONISE
Address 177 NE 103RD ST.
City-State-Zip: MIAMI SHORES FL 33138

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CATHERINE SPINNENWEBER-SALOW

PRESIDENT

03/11/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title FUNDRAISING COORDINATOR
Name MURDOCCO, JACQUELINE
Address 519 41ST ST.
City-State-Zip: MIAMI BEACH FL 33140